

# Request Form for Monolingual Assessments For CDA Paper Applications ONLY



(For languages other than English or Spanish)

Your request must be approved by the Council **before** you submit your CDA **PAPER** application. **IF applying on-line**, please do not use this form. You will complete your request for Monolingual Assessment in the on-line **Pre-application Language Specialization** section.

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**Language you are requesting for assessment:** \_\_\_\_\_; this is the language my program requires me to speak in conducting my daily work with children and families:

Yes  No

**Type of CDA Credential setting for which I am applying (select one):**

Preschool  Infant and Toddler  Family Child Care  Home Visitor

**Submit this request form for approval to one of the following:**

**EMAIL:** [languages@cdacouncil.org](mailto:languages@cdacouncil.org)

**MAIL:** Council for Professional Recognition  
**Attn: Other Languages (Multilingual & Special Programs Dept.)**  
2460 16<sup>th</sup> Street, NW  
Washington, DC 20009

### Council's Decision:

Request is **granted** for Monolingual assessment in the following language: \_\_\_\_\_

Request is **denied** - Council Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- **If your request is granted you must submit your CDA Paper Application, along with this form approved, and full payment of \$500\* via postal service (regular mail).** Please follow the instructions outlined in the attached letter to ensure a smooth credentialing process.
- **If your request is denied** - Review the explanation of the denial provided in your cover letter.

*\*The present application fee for all paper applications is \$500.*